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PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.5(b)) PAPLICATION ELEMENTS APPLICATION ELEMENTS See MPPP obspire 600 concerning utility patient application contents. 1. Per Tensmittal Form (e.g., PTO/SBI17) (Submit an original and is deplicate for the princessing) Applicat claims small entity status. See 37 CFR 1.27. 3. Specification Control of the state of the princessing princessing of the princessing princessing of the princessing princessing princessing princessing of the princessing prin		UTILITY		Attorney Docket No.	189072 (8830-225)	TO T)를			
(Only for new nonprovisional applications under 37 CFR 1.53(a)) APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patient application contents. ADDRESS TO: Mail Step Presert Application			First Inventor	Karin HAYHOW						
Cory for new monprovisional applications under 37 CFR 1.53(b) Express Mail Label No. Evg9898768202 APPLICATION ELEMENTS	TRANSMITTAL		Title	MARKETING SCHE	ME S.					
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patient application contents. ADDRESS TO:	(Only for nev	w nonprovisional applications under 37 CFR 1.5	3(b))	Express Mail Label No.	EV098987682US	54				
Computer Program (Appendix)	•		entents.	ADDRESS TO:	Commissioner for Pate P.O. Box 1450	nts 0				
5. Oath or Declaration Total Sheets 11. (when there is an assignee) Attomey 12. Information Document (if applicable) 13. Copies of IDS Information Document (if applicable) 14. Information Document (if applicable) 15. Information Document (if applicable) 16. Information Document (if applicable) 17. Information Document (if applicable) 18. Information Document (if applicable) Information Information (information Request under 35 Uss. C. 122 (b)(2)(B)(I) (Inforeign priority is claimed) Information Request under 35 Uss. C. 122 (b)(2)(2)(B)(I) Applicant must attach form PTO/SB/35 Information Document (information Request under 35 Uss. C. 122 (b)(2)(B)(I) Applicant must attach form PTO/SB/35 Information Document (information Request under 35 Uss. C. 122 (b)(2)(B)(I) Applicant must attach form PTO/SB/35 Information Document (information Request under 35 Uss. C. 122 (b)(2)(B)(I) Applicant must attach form PTO/SB/35 Information Document (information Request under 35 Uss. C. 122 (b)(2)(B)(I) Applicant must attach form PTO/SB/35 Information Document (information Request under 35 Uss. C. 122 (b)(2)(B)(I) Applicant must attach form PTO/SB/35 Information Document (information Ptormation Ptormation Ptormation Ptormation Ptormation Ptormation Ptormation Ptormation Pto	2. Applican Applican See 37 C Specifica (preferred - Descript - Cross R - Stateme - Referen or a com - Backgro - Brief Su - Brief De - Detailed - Claim(s) - Abstract	n original and a duplicate for fee processing) It claims small entity status. CFR 1.27. ation [Total Pages 28 It arrangement set forth below) Itive title of the invention reference to Related Applications ent Regarding Fed sponsored R & D ace to sequence listing, a table, inputer program listing appendix sund of the Invention mmary of the Invention scription of the Drawings (if filed) I Description I of the Disclosure	1	8. Nucleotide and/or A (if applicable, all ned a. Computer b. Specificat i. CD-ii. Pap c. Statemer ACCOMPAN	ram (Appendix) mino Acid Sequence essary) Readable Form (CRF tion Sequence Listing ROM or CD-R (2 copi ter ats verifying identity of YING APPLICAT Papers (cover sheet &	Submission on: ies); or above copies ION PARTS. document(s))	line of the second			
Continuation	5. Oath or Declar a. Newly b. Copy (for composite of the	ration [Total Sheetsy executed (original or copy) If from a prior application (37 CFR 1.63(d)) Internation/divisional with Box 18 completed ELETION OF INVENTOR(S) Igned statement attached deleting inventor(s) Igned in the prior application, see 37 CFR 63(d)(2) and 1.33(b). International Sheet. See 37 CFR 1.76]	10. 37 CFR 3.73((when there is English Trans	b) Statement s an assignee) slation Document (if apisclosure SS)/PTO-1449 mendment pt Postcard (MPEP 50 pocifically itemized) by of Priority Document prity is claimed) on Request under 35 Lepplicant must attach functions.	Power of Attorney pplicable) Copies of IDS Citations O3) It(s) J.S.C. 122 orm PTO/SB/35	Philipsinca y average			
Prior application information: Examiner Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied und 55h, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number: 23973 OR Correspondence address below	SDECIFICATION TOTIOWING THE TIME OF IN AN AUDICATION DATA SHEET UNDER STOCK 1.19.									
Name DRINKER BIDDLE & REATH LLP One Logan Square, 18th and Cherry Streets State PA Zip Code 19103-6996 Country US Telephone (215) 988-3309 Fax (215) 988-2757 Name (Print/Type) GREGORY J. LAVORGNA Registration No. (Attorney/Agent) 30,469	Prior application information: Examiner For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under the prior application and is hereby incorporated by reference.									
Name DRINKER BIDDLE & REATH LLP One Logan Square, 18th and Cherry Streets State PA Zip Code 19103-6996 Country US Telephone (215) 988-3309 Fax (215) 988-2757 Name (Print/Type) GREGORY J. LAVORGNA Registration No. (Attorney/Agent) 30,469		19. COI	RRESPON	DENCE ADDRESS						
DRINKER BIDDLE & REATH LLP One Logan Square, 18th and Cherry Streets City Philadelphia State PA Zip Code 19103-6996 Country US Telephone (215) 988-3309 Fax (215) 988-2757 Name (Print/Type) GREGORY J. LAVORGNA Registration No. (Attorney/Agent) 30,469	Custome	er Number: 239	73	OR	Correspondence	address below				
Address One Logan Square, 18th and Cherry Streets City Philadelphia State PA Zip Code 19103-6996 Country US Telephone (215) 988-3309 Fax (215) 988-2757 Name (Print/Type) GREGORY J. LAVORGNA Registration No. (Attorney/Agent) 30,469	Name									
City Philadelphia State PA Zip Code 19103-6996 Country US Telephone (215) 988-3309 Fax (215) 988-2757 Name (Print/Type) GREGORY J. LAVORGNA Registration No. (Attorney/Agent) 30,469	Address						-			
Country US Telephone (215) 988-3309 Fax (215) 988-2757 Name (Print/Type) GREGORY J. LAVORGNA Registration No. (Attorney/Agent) 30,469	C	Chate 7in Code								
Name (Print/Type) GREGORY J. LAVORGNA				IF O	Fax		1			
	L			(2.0) 555 555	ov/Agent) 30 469	1,,	ጘ .			

This collection of information is required by 3 CFR 1.53(b). The information of required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mall Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (08-03)
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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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C mplete if Known						
Application Number						
Filing Date						
First Named Inventor	Karin HAYHOW					
Examiner Name						
Art Unit						
Attornov Docket No.	189072 (8830-225)					

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES					
✓ Deposit Account:	<u>Large l</u>	Large Entity Small Entity				
Denosit	Fee Code			Fee (\$)	Fee Description	Coo Boid
Account 50-05/3	1051	130	2051	•	Surcharge - late filing fee or oath	Fee Paid
Number Deposit	1052	50	2052		Surcharge - late provisional filing fee or	
Account Name					cover sheet	
The Director is authorized to: (check all that apply)	1053	130	1053		Non-English specification For filing a request for ex parte reexamination	
Charge fee(s) indicated below Credit any overpayments		2,520	1812	_,	, ,	
Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920-	Requesting publication of SIR prior to Examiner action	\vdash
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	<u> </u>
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month	
Large Entity Small Entity	1253	930	2253	465	Extension for reply within third month	
Fee Fee Fee Fee Fee Description Fee Paid Code (\$)	1254	1,450	2254	725	Extension for reply within fourth month	
1001 750 2001 375 Utility filing fee	1255	1,970	2255	985	Extension for reply within fifth month	
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of Appeal	
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 375	1452	110	2452	55	5 Petition to revive - unavoidable	
	1453	1,300	2453	650	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,300	2501	650	Utility issue fee (or reissue)	
Extra Claims below Fee Paid	1502	470	2502	235	Design issue fee	
Total Claims 29 -20** = 9 X 9 = 81	1503	630	2503		5 Plant issue fee	
Independent 2 - 3** = 0 X 0 =0 Claims Multiple Dependent	1460	130	1460	130	Petitions to the Commissioner	
	1807	50	1807	7 50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) Code (\$)	8021	40	802	1 40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	750	2809	375	Filing a submission after final rejection	
1201 84 2201 42 Independent claims in excess of 3					(37 CFR 1.129(a))	\vdash
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	5 For each additional invention to be examined (37 CFR 1.129(b))	
1204 84 2204 42 ** Reissue independent daims over original patent	1801	750	2801	375	5 Request for Continued Examination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 81	Other fee (specify)					
**or number previously paid, if greater, For Reissues, see above	*Red	uced by	Basic	Filing F	Fee Paid SUBTOTAL (3) (\$)	

SUBMITTED BY

Name (Print/Type)

GREGORY J. LANDEGNA

Registration No. (Attorney/Agent)

Signature

(Complete (if applicable))

Telephone 215 988-3309

Date August 28, 2003

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ATTORNEY DOCKET NO. 189072 (8830-225)

Certificat of Express Mailing under 37 CFR 1.10

EXPRESS MAIL LABEL NO. EV098987682US Date of deposit: August 28, 2003

I hereby certify that this correspondence, along with any paper referred to as being attached or enclosed, and/or fee, is being deposited with the United States Postal Service, "EXPRESS MAIL—POST OFFICE TO ADDRESSEE" service under 37 CFR 1.10, on the date indicated above, and addressed to:

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

SIGNATURE

Karen M. Spina

TYPED OR PRINTED NAME OF PERSON OF SIGNING CERTIFICATE

Utility Patent Application; Transmittal Letter PTO/SB/05; Fee Transmittal; Application Data Sheet; Check \$ 456 for filing/extra claims fees; Postcard Receipt